

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
	IND	DEP	IND	DEP	IND	DEP		
1							51	/
2							52	/
3							53	/
4							54	/
5							55	/
6							56	/
7							57	/
8							58	/
9							59	/
10							60	/
11							61	/
12							62	/
13							63	/
14							64	/
15							65	/
16							66	/
17							67	/
18							68	/
19							69	/
20							70	/
21							71	/
22							72	/
23							73	/
24							74	/
25							75	/
26							76	/
27							77	/
28							78	/
29							79	/
30							80	/
31							81	/
32							82	/
33							83	/
34							84	/
35							85	/
36							86	/
37							87	/
38							88	/
39							89	/
40							90	/
41							91	/
42							92	/
43							93	/
44							94	/
45							95	/
46							96	/
47							97	/
48							98	/
49							99	/
50							100	/
TOTAL IND.							TOTAL IND.	8.
TOTAL DEP.							TOTAL DEP.	4.
TOTAL CLAIMS							TOTAL CLAIMS	24.